

GOVERNOR'S OFFICE OF CRIMINAL JUSTICE PLANNING  
1130 K STREET, SUITE 300  
SACRAMENTO, CA 95814  
(916) 324-9100



APPLICATION COVER SHEET

RFA PROCESS

MAJOR NARCOTIC VENDORS PROSECUTION PROGRAM

Deliver to: DRUG ENFORCEMENT BRANCH

Submitted by:

San Bernardino County  
District Attorney's Office  
316 N. Mt. View Ave.  
San Bernardino, CA 92415-0004  
(909) 387-6613

**GOVERNOR'S OFFICE OF CRIMINAL JUSTICE PLANNING (OCJP A301)  
GRANT AWARD FACE SHEET**

The Governor's Office of Criminal Justice Planning, hereafter designated OCJP, hereby makes a grant award of funds to the following Administrative Agency (1) County of San Bernardino hereafter designated Grantee, in the amount and for the purpose and duration set forth in this grant award.

(2) Implementing Agency Name: District Attorney's Office

Contact: Jane K. Allen

E-mail address: jallen@da.sbcounty.gov

Address: 316 N. Mt. View Ave., San Bernardino, CA 92415-0004

Telephone (909) 387-6613

(3) Project Title (60 characters maximum)

(6) Award No.

**Major Narcotics Vendor Prosecution Program**

(4) Project Director (Name, Title, Address, Telephone)  
(four lines maximum)

Jane K. Allen - Chief, Bureau of Administration  
316 N. Mt. View Ave., 3<sup>rd</sup> Floor  
San Bernardino, CA 92415-0004  
(909) 387-6613

(7) Grant Period  
July 1, 2003 - June 30, 2004

(8) Federal Amount  
Not Applicable

(9) State Amount  
\$169,818

(5) Financial Officer (Name, Title, Address, Telephone)  
(four lines maximum)

Cindy Monfort - Supervisor, Bureau of Administration  
316 N. Mt. View Ave., 3<sup>rd</sup> Floor  
San Bernardino, CA 92415-0004  
(909) 387-6631

(10) Cash Match  
Not Applicable

(11) In-Kind Match  
Not Applicable

(12) Total Project Cost  
\$169,818

This grant award consists of this title page, the proposal for the grant which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify that: (1) I am vested with authority to, and have the approval of the City/County Financial Officer, City Manager, or Governing Board Chair, enter into this grant award agreement; and (2) all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Program Guidelines, the OCJP Grantee Handbook, and the OCJP audit requirements, as stated in this Request for Proposal (RFP) or Request for Application (RFA). The grant recipient further agrees to all legal conditions and terms incorporated by reference in this RFP or RFA.

**FOR OCJP USE ONLY**

Item:

Chapter:

PCA No.:

Components No.:

Project No.:

Amount:

Split Fund:

Split Encumber:

Year:

Fed. Cat. #:

Match Requirement:

Fund:

Program:

Region:

(13) Official Authorized to Sign for  
Applicant/Grant Recipient

Name: Michael A. Ramos

Title: District Attorney

Address: 316 N. Mt. View Ave., 3<sup>rd</sup> Floor  
San Bernardino, CA 92415-0004

Telephone: (909) 387-6603

Date: June 2, 2003

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

\_\_\_\_\_  
Fiscal Officer, OCJP Date

\_\_\_\_\_  
Executive Director, OCJP Date

## PROJECT SERVICE AREA INFORMATION

1. COUNTY OR COUNTIES SERVED: Enter the name(s) of the county or counties served by the project. Put an asterisk where the principal office of the project is located.

San Bernardino County \*

[STAFF NOTE: Include items 2, 3 and 4 only if required by the federal funding source.]

2. U.S. CONGRESSIONAL DISTRICT(S): Enter the number(s) of the U.S. Congressional District(s) which the project serves. Put an asterisk for the district where the principal office of the project is located.

25<sup>th</sup>, 26<sup>th</sup>, 41<sup>st</sup>, 42<sup>nd</sup>, and 43<sup>rd</sup> \* Districts

3. STATE ASSEMBLY DISTRICT(S): Enter the number(s) of the State Assembly District(s) which the project serves. Put an asterisk for the district where the principal office of the project is located.

32<sup>nd</sup>, 34<sup>th</sup>, 36<sup>th</sup>, 59<sup>th</sup>, 60<sup>th</sup>, 61<sup>st</sup>, 62<sup>nd</sup> \*, 63<sup>rd</sup>, and 65<sup>th</sup> Districts

4. STATE SENATE DISTRICT(S): Enter the number(s) of the State Senate District(s) which the project serves. Put an asterisk for the district where the principal office of the project is located.

17<sup>th</sup>, 18<sup>th</sup>, 29<sup>th</sup>, 31<sup>st</sup>, and 32<sup>nd</sup> \* District

5. POPULATION OF SERVICE AREA: Enter the total population of the service area served by the project.

1,709,434

## PROJECT CONTACT INFORMATION

Applicant: San Bernardino County

Implementing Agency (if applicable): District Attorney's Office

Project Title: Major Narcotics Vendor Prosecution Program

Grant Number (to be added by OCJP): \_\_\_\_\_

Provide the name, title, address, telephone number, and e-mail address for the project contact persons named below. If a section does not apply to your project, enter "N/A."

1. The person having day-to-day responsibility for the project:

Name: Kenneth Smith  
Title: Supervising Deputy District Attorney  
Address: 316 N. Mt. View Ave., San Bernardino, CA 92415-0004  
Telephone Number: (909) 387-6494 Fax Number: (909) 387-6444  
E-Mail Address: ksmith@da.sbcounty.gov

2. The person to whom the person listed in #1 is accountable:

Name: James B. Hackleman  
Title: Assistant District Attorney  
Address: 316 N. Mt. View Ave., San Bernardino, CA 92415-0004  
Telephone Number: (909) 387-6601 Fax Number: (909) 387-6313  
E-Mail Address: Not for publication

3. The executive director of a nonprofit organization or the chief executive officer (e.g., chief of police, superintendent of schools) of the implementing agency:

Name: Michael A. Ramos  
Title: District Attorney  
Address: 316 N. Mt. View Ave., San Bernardino, CA 92415-0004  
Telephone Number: (909) 387-6603 Fax Number: (909) 387-6313  
E-Mail Address: Not for publication

4. The chair of the governing body of the implementing agency: (Provide address and telephone number other than that of the implementing agency.)

Name: Fred Aguiar  
Title: Chairperson, Board of Supervisors, San Bernardino County  
Address: 385 N. Arrowhead Ave., 5<sup>th</sup> Floor, San Bernardino, CA 92415-0110  
Telephone Number: (909) 387-4866 Fax Number: (909) 387-8903  
E-Mail Address: Not for publication

5. The person responsible for the project from the applicant agency, if different than #1:

Name: Jane K. Allen  
Title: Chief, Bureau of Administration  
Address: 316 N. Mt. View Ave., 3<sup>rd</sup> Floor, San Bernardino, CA 92415-0004  
Telephone Number: (909) 387-6613 Fax Number: (909) 387-6313  
E-Mail Address: jallen@da.sbcounty.gov

## CERTIFICATION OF ASSURANCE OF COMPLIANCE

I, Michael A. Ramos, hereby certify that:  
(official authorized to sign grant award; same person as line 13 on Grant Award Face Sheet)

GRANTEE: County of San Bernardino

IMPLEMENTING AGENCY: District Attorney's Office

PROJECT TITLE: Major Narcotics Vendor Prosecution Program

is responsible for reviewing the OCJP Grantee Handbook and adhering to all of the Grant Award Agreement requirements (state and/or federal) as directed by the Office of Criminal Justice Planning including, but not limited to, the following areas:

### I. Equal Employment Opportunity - (*Grantee Handbook Section 2151*)

It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of Race, Religious Creed, Color, National Origin, Ancestry, Disability (mental and physical) including HIV and AIDS, Medical Condition (cancer and genetic characteristics, Marital Status, Sex, Sexual Orientation, Denial of Family Medical Care Leave, Denial of Pregnancy Disability Leave, or Age (over 40).

Please provide the following information:

A.A. Officer: J. Ricardo Martinez

Title: Affirmative Action/Equal Opportunity Manager

Address: 175 West 5<sup>th</sup> Street, San Bernardino, CA 92415-0440

Phone: (909) 387-5584

Email: Not for Publication

### II. Drug-Free Workplace Act of 1990 - (*Grantee Handbook Section 2152*)

The State of California requires that every person or organization awarded a grant or contract shall certify it will provide a drug free workplace.

### III. California Environmental Quality Act (CEQA) - (*Grantee Handbook Section 2153*)

The State of California requires all OCJP funded projects to obtain written certification that the project is not impacting the environment negatively.

#### **IV. Lobbying - (Grantee Handbook Section 2154)**

OCJP grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

#### **V. Debarment and Suspension - (Grantee Handbook Section 2155)** (This applies to federally funded grants only)

OCJP funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

#### **VI. Proof of Authority from City Council/Governing Board**

*The above named organization (applicant) accepts responsibility for and will comply with the requirement to obtain written authorization from the city council/governing board in support of this program. The Applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of OCJP, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and OCJP disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from OCJP shall not be used to supplant expenditures controlled by the city council/governing board.*

The Applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The Applicant is also required to maintain said written authorization on file and readily available upon demand.

All appropriate documentation must be maintained on file by the project and available for OCJP or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the grantee may be ineligible for award of any future grants if the Office of Criminal Justice Planning (OCJP) determines that any of the following has occurred: (1) the grantee has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

### CERTIFICATION

I, the official named below, am the same individual authorized to sign the Grant Award Agreement [line 13 on Grant Award Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: \_\_\_\_\_

Authorized Official's Typed Name: Michael A. Ramos

Authorized Official's Title: District Attorney of San Bernardino County

Date Executed: June 2, 2003

Federal ID Number: 95-6002748W

Executed in the City/County of: San Bernardino

### AUTHORIZED BY:

- ☒ City/County Financial Officer  
☐ City Manager  
☐ Governing Board Chair

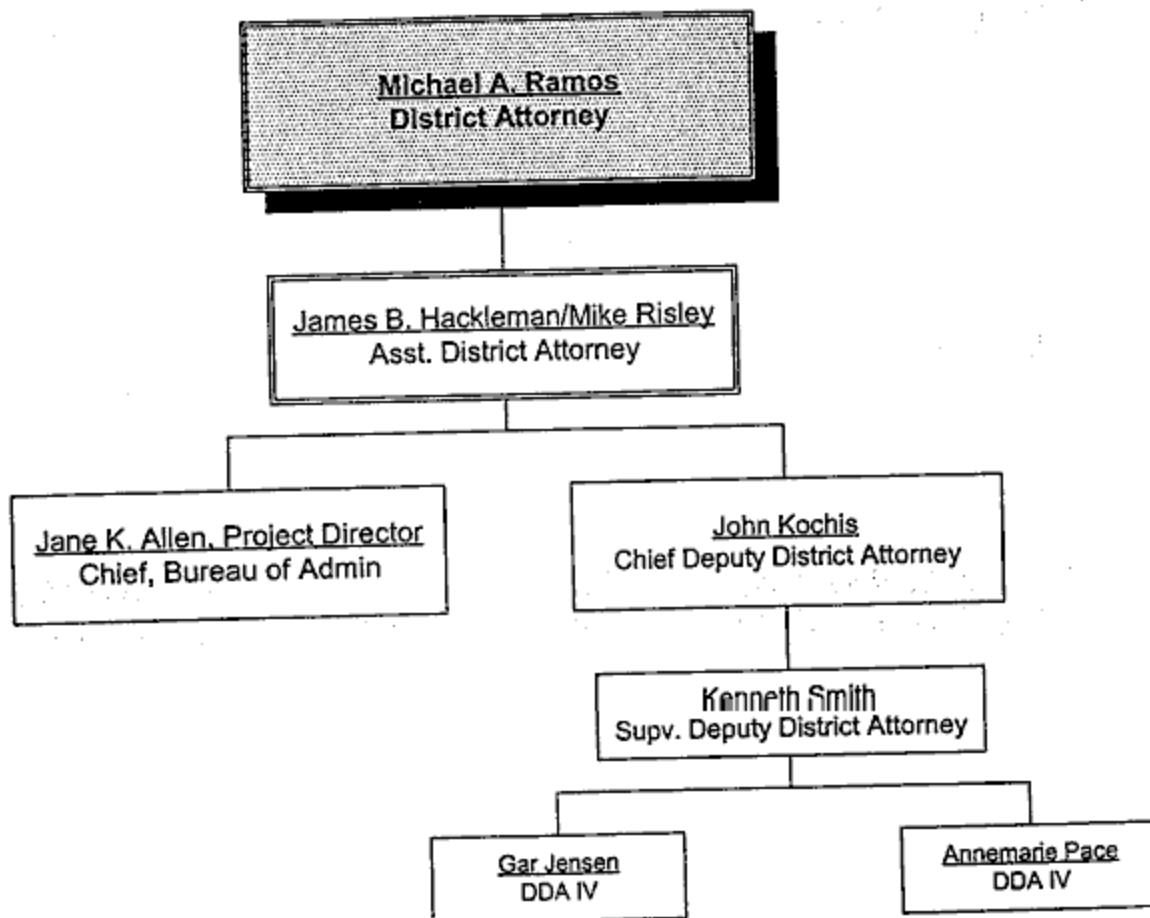
Signature: \_\_\_\_\_

Typed Name: Cindy Monfort

Title: Supervisor, Bureau of Administration

# San Bernardino County District Attorney

Major Narcotics Vendors Prosecution Program







BUDGET CATEGORY AND LINE-ITEM DETAIL			F/Y 2003/2004 COST
<b>B. Operating Expenses</b>			
AIR TRAVEL	2003/2004 County portion	200	0
AUDIT ALLOWANCE	2003/2004 County portion	300	0
COMMUNICATIONS	2003/2004 County portion	2,800	0
MEMBERSHIPS	2003/2004 County portion	1,500	0
OFFICE EXPENSE	2003/2004 County portion	500	0
OTHER TRAVEL	2003/2004 County portion	200	0
POSTAGE	2003/2004 County portion	200	0
PRIVATE MILEAGE	2003/2004 County portion	1,400	0
PROFESSIONAL SERVICES	2003/2004 County portion	1,400	0
PUBLICATIONS	2003/2004 County portion	300	0
RENT & LEASES	2003/2004 County portion	3,400	0
		12,200	
<b>TOTAL</b>			0

